



Felix F. Ungacta, M.D., board certified orthopedic surgeon  
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September 18, 2020

Debra Savage, Chair  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street, 2nd Floor  
Springfield, Illinois 62761

Re: Metroeast Endoscopic Surgery Center, Project No. 20-17

Dear Ms. Savage:

I am a board-certified Illinois licensed orthopedic surgeon practicing in the Metroeast region. I am writing in support of Metroeast Endoscopic Surgery Center's application to expand its privileging at its existing ambulatory surgical treatment center in Fairview Heights, Illinois to orthopedic surgery.

Midwest Bone and Joint Surgery (MBJS) opened its doors on October 2007. Since that time, I have personally seen and treated over **12,000 patients**. When my practice started in October of 2007, the old HSHS Saint Joseph's Hospital (est 1878) was our hospital. This hospital, which had served our community for over 100 years, was literally on its last legs. Peggy Sebastian, the incoming CEO was commissioned to build the new hospital we have today, located on Troxler Ave. I supported the construction of this new hospital with a donation of \$100,000 which was used to help build the Dr. and Mrs. Felix F Ungacta Surgery Center and the Ungacta Conference Center.

Since 2007, MBJS has been the sole full-time orthopedic practice serving the Highland Community and the surrounding area. MBJS was a solo practice from 2007-2018. 99% of all orthopedic surgical cases were performed at HSHS Saint Joseph's Hospital. Prior to 2007, Highland did not have a full-time orthopedic surgeon whose practice is dedicated to the City of Highland.

Saint Joseph's Hospital Highland has been a blessing for our community. The level of service and the exceptional care I often tell my patients is on a par with Barnes-Jewish Hospital, Washington University. I can say this, because this is where I did my orthopedic residency. Patients felt comfortable knowing that their surgeon trained at Washington University, Saint Louis and that their surgeon had direct access to orthopedic colleagues for more advanced and complicated cases.

Fast forward to 2020. 13 years after I started my practice in Highland, IL. **Peggy Sebastian** former **CEO of HSHS Saint Joseph's Hospital, Highland IL** and former **CEO of HSHS Saint Elizabeth's Hospital, O'Fallon Illinois** has now been commissioned as COO of Midwest Bone and Joint Surgery to grow our practice. We are actively recruiting 2 additional full-time orthopedic surgeons. We have successfully signed on, Dr Robert Leb who will be starting with Midwest Bone



and Joint Surgery, October 12, 2020. In addition, we are negotiating an employment contract with Lieutenant Colonel Ryan Sieg, MD, Mako Robotic expert, who started the Mako Robotic Program for the Department of Defense.

Highland and its surrounding areas have been underserved with regards to orthopedic services. The same can be said regarding other surgical services such as otolaryngology, urology and general surgery.

In 2007, I prided myself in always looking forward and planning for all possible contingencies. Needless to say, I did not see 2020. **Covid-19** is a reality for all of us in healthcare today, and for all years to come. **We must change the way in which we provide healthcare.** We see this happening already with **virtual visits** and **curbside diagnostic testing**. We are doing this with an underlying goal. The goal being to promote **social distancing** and to **limit contact** with individuals who have either a high likelihood of having **Covid-19** or with individuals who are at a high risk of complications from **Covid-19**.

In my practice more than **90% of my surgical cases are "outpatient" procedures**. This number is increasing with the advent of **Robotic Joint Replacement**. The question that begs us today, is **where is it most appropriate to perform "outpatient" surgical procedures?** I think the answer is obvious.

In the **hospital setting**, from the time a patient enters a hospital to the time they are in the operating room, to the time they return to their car, they will potentially come into contact with visitors and other hospital employees who have no direct role in their outpatient surgical procedure. In addition, a **hospital setting** is one in which **"sick" patients are treated**, often with communicable conditions such as **MRSA infections** and **complications of Covid-19**. It is almost impossible to eradicate all viral and bacterial particles from all surfaces, such as door handles, bed railings etc...

In an **outpatient surgery center**, these same issues can be argued. However, in this focused setting of performing outpatient surgical procedures in **otherwise healthy patients**, less health care personnel are required. This results in less people traffic to contend with and therefore, less contact with potentially **Covid-19 positive** individuals or **MRSA carriers**.

As you know, I previously provided a referral letter for this project due to my need to have an option to perform outpatient surgery in the optimal setting of an outpatient surgical center. My initial desire to have access to additional operating rooms was in anticipation of the increase need for more than 2 operating rooms currently available in HSHS Saint Joseph's Hospital, Highland IL with the addition of more orthopedic surgeons to my practice. **In 2020, with the advent of Covid-19**, the reasons to have this option available is **"critical"**.

When, ( not if ), another version of Covid-19 hits our country, we **must** be prepared. Being prepared means contingency planning to **make available all hospital equipment and personnel for those that are critical and in need of this level of care**. Keeping in mind also that other healthcare services do not necessarily need to come to a complete halt, as it did only a few months ago. By **separating service lines of care now**, ie... **outpatient services** should be performed at **outpatient facilities**, and **hospital services** should be performed in a **hospital setting**, we will not only be addressing the current Covid crisis, we will also be more prepared for the next Covid crisis.

I generally perform 200 to 250 cases per year. With the addition of **Dr Robert Leb** and possibly **Dr Ryan Sieg**, the estimated number of cases is **750 cases per year**. **90% of these cases can be performed in an outpatient setting**. Unless I or my patients are convinced that performing



outpatient procedures in a hospital setting is more safe than performing the same procedure in an outpatient surgery setting, I will continue to seek out freestanding outpatient surgery facilities in order to **decrease the risk of contracting communicable diseases such as Covid-19**. As a surgeon, it is my absolute responsibility to be my patients Number 1 advocate, at all times. At times, this responsibility may mean going up against the **"Goliaths" of healthcare**. If not **your doctor**, then who will? Yes, one can only imagine the consequences.

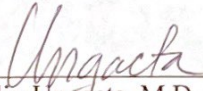
As a disclaimer, I want to emphasize to the committee, that in my 19 years of orthopedic practice, I have never owned or been part owner of any Ambulatory Surgery Center (ASC), Imaging Center or Physical Therapy Services and I have no plans or interest in any type of ownership or partnership in any of these services. My business is providing the absolute best orthopedic care to patients of all ages, all genders and all socioeconomic groups. The quality of my orthopedic practice can be measured and judged by the fact that I have had not a single medical malpractice lawsuit in 19 yrs. of orthopedic practice (of which 13 yrs. has been in Madison County, Illinois). **Patient advocacy** has been the keystone of my practice since day 1.

My previously **stated intent of utilization** of Metroeast Endoscopic Surgery Center for orthopedic outpatient services has not been used to support another pending or approved certificate of need application. My anticipated involvement with Metroeast Endoscopic Surgery Center is based solely on the **current need** and as well as the **future need for outpatient surgical services**. I have **no business arrangement** with the owner of this center.

It should be noted that in the suburban metro Chicago region, approximately half of outpatient orthopedic cases are performed in ASCs, yet Metroeast residents must leave the state for this option. Providing my community, including patients with Medicaid insurance, with a local option for their outpatient surgery is a priority. I am a participating provider of Medicaid plans and **I am an ardent advocate of any program which allows for increased access to healthcare for patients with Medicaid insurance**.

I support the expansion of services at Metroeast Endoscopic Surgery Center and any other entity that will provide a freestanding center to perform outpatient surgical services.

The information in this letter is true and correct to the best of my knowledge.

  
Felix Ungacta, M.D.  
Board Certified Orthopedic Surgeon  
CEO Midwest Bone and Joint Surgery  
30 Apex Drive, Ste. 1  
Highland, IL, 62249

Subscribed and sworn to me this 18<sup>th</sup> day of September 2020

Notary Public



KARA MAYER  
Notary Public - Notary Seal  
State of Missouri  
Commissioned for St. Louis City  
My Commission Expires: May 31, 2024  
Commission Number: 20037811